

Permit #: 20146

Date Issued: 2-2-96

County: Bates

Date Cancelled: \_\_\_\_\_

CONFIDENTIAL UNTIL: \_\_\_\_\_

Date Plugged: 2-9-96

COMMENTS:

OCC FORMS	Date Received
1	
2	
3	
3i	<u>2-2-96</u>
4	
4i	
5	
6	
7	
8	<u>4-5-96</u>
11	
12	
Misc. Form 2	

	TYPE	ID #	Date Received
Logs			
Samples			
	chip		
	core		
Analyses			
	water		
	core		
Additional Submitted Data:			

## APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

APPLICATION TO DRILL ☐DEEPEN ☐PLUG BACK ☐for an oil well ☐or gas well ☐

Hydrocarbon Test X

NAME OF COMPANY OR OPERATOR Town Oil Co. DATE 1-30-9616205 W. 287 St.PaolaKansas 66071

Address

City

State

## DESCRIPTION OF WELL AND LEASE

Name of lease <u>Reed</u>	Well number <u>1</u>	Elevation (ground) <u>871</u>
------------------------------	-------------------------	----------------------------------

WELL LOCATION (give footage from section lines)  
950 ft. from (N) XX sec. line 2400 ft. from (E) XX sec. line

WELL LOCATION  
 Section 1 Township 38N Range 33W County Bates

Nearest distance from proposed location to property or lease line: N/A feet  
 Distance from proposed location to nearest drilling, completed or applied for well on the same lease: N/A feet

Proposed depth. <u>75</u>	Drilling contractor, name & address <u>Town Oil Co.</u>	Rotary or Cable Tools <u>Rotary</u>	Approx. date work will start <u>1-30-96</u>
------------------------------	--	--	--

Number of acres in lease <u>120</u>	Number of wells on lease, including this well, completed in or drilling to this reservoir: <u>0</u> Number of abandoned wells on lease: <u>0</u>
--	---

If lease, purchased with one or more wells drilled, from whom purchased: Name N/A No. of Wells: producing 0  
 Address N/A injection 0  
 inactive 0  
 abandoned 0

Status of Bond  
 Single Well ☐ Amt.                      Blanket Bond ☒ Amt. \$60,000 ☐ ON FILE ☐ ATTACHED

Remarks: (If this is an application to deepen or plug back, briefly describe work to be done, giving present producing zone and expected new producing zone) use back of form if needed.

N/A

Proposed casing program: <u>N/A</u>				Approved casing -- To be filled in by State Geologist <u>N/A</u>			
amt.	size	wt./ft.	cem.	amt.	size	wt./ft.	cem.

I, the undersigned, state that I am the                      of the                      (company), and that I am authorized by said company to make this report, and that this report was prepared under my supervision and direction and that the facts stated therein are true, correct and complete to the best of my knowledge.

Signature Lulu TownPermit Number: 20146☒ Drillers log required☒ Drill stem test info. required if runApproval Date: 2/2/96☒ E-logs required if run☐ Samples requiredApproved By: Jane H. Williams ☒ Core analysis required if run☐ Samples not required

Note: This Permit not transferable to any other person or to any other location.

Remit two copies to: Missouri Oil and Gas Council  
P.O. Box 250 Rolla, Mo. 65401

One will be returned for driller's signature

WATER SAMPLES REQUIRED ☐

Approval of this permit by the Oil and Gas Council does not constitute endorsement of the geologic merits of the proposed well nor endorsement of the qualifications of the permittee.

3/12/92



MISSOURI DEPARTMENT OF NATURAL RESOURCES  
MISSOURI OIL AND GAS COUNCIL  
**PLUGGING RECORD**

FORM OGC-7

OWNER <b>Town Oil Co.</b>		ADDRESS <b>16205 W. 287 St. Paola, KS. 66071</b>	
NAME OF LEASE <b>Reed</b>		WELL NUMBER <b>1</b>	PERMIT NUMBER (OGC-3 OR OGC-31 NUMBER) <b>20146</b>
LOCATION OF WELL <b>950' FNL 2400' FWL</b>		SEC-TWP-RNG OR BLOCK & SURVEY <b>1-38N-33W</b>	COUNTY <b>Bates</b>
APPLICATION TO DRILL THIS WELL WAS FILED IN NAME OF: <b>Town Oil Co.</b>		HAS THIS WELL EVER PRODUCED OIL OR GAS? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	CHARACTER OF WELL AT COMPLETION (INITIAL PRODUCTION) OIL (BBLS/DAY) <b>N/A</b> GAS (MCF/DAY)
DATE ABANDONED <b>2-9-96</b>	TOTAL DEPTH <b>49</b>	AMOUNT WELL PRODUCING PRIOR TO ABANDONMENT OIL (BBLS/DAY) GAS (MCF/DAY) <b>N/A</b>	WATER (BBLS/DAY)
Name of each formation containing oil or gas. Indicate which formation open to well bore at time of abandonment. <b>N/A</b>		Fluid content of each formation	Depth interval of each formation
			Size, kind, & depth of plugs used, giving amount cement. <b>2 sacks cement</b>
SIZE PIPE <b>N/A</b>	PUT IN WELL (FT)	PULLED OUT (FT)	LEFT IN WELL (FT)
WAS WELL FILLED WITH MUD-LADEN FLUID?		INDICATE DEEPEST FORMATION CONTAINING FRESH WATER	
<b>NAME AND ADDRESSES OF ADJACENT LEASE OPERATORS OR OWNERS OF THE SURFACE</b>			
NAME		ADDRESS	
DIRECTION FROM THIS WELL			
<b>N/A</b>			
METHOD OF DISPOSAL OF MUD PIT CONTENTS ▶ <b>N/A</b>			
NOTE FILE THIS FORM IN DUPLICATE WITH: (USE REVERSE SIDE FOR ADDITIONAL DETAIL)			
<b>CERTIFICATE</b> ▶ I, the undersigned, state that I am the <u>Partner</u> of the <u>Town Oil Co.</u> (Company), and that I am authorized by said company to make this report; and that this report was prepared under my supervision and direction and that the facts stated therein are true, correct, and complete to the best of my knowledge.			
SIGNATURE <i>Ruth Town</i>		DATE <i>4-3-96</i>	

DETAIL OF FORMATIONS PENETRATED	
1	100
2	100
3	100
4	100
5	100
6	100
7	100
8	100
9	100
10	100
11	100
12	100
13	100
14	100
15	100
16	100
17	100
18	100
19	100
20	100
21	100
22	100
23	100
24	100
25	100
26	100
27	100
28	100
29	100
30	100
31	100
32	100
33	100
34	100
35	100
36	100
37	100
38	100
39	100
40	100
41	100
42	100
43	100
44	100
45	100
46	100
47	100
48	100
49	100
50	100
51	100
52	100
53	100
54	100
55	100
56	100
57	100
58	100
59	100
60	100
61	100
62	100
63	100
64	100
65	100
66	100
67	100
68	100
69	100
70	100
71	100
72	100
73	100
74	100
75	100
76	100
77	100
78	100
79	100
80	100
81	100
82	100
83	100
84	100
85	100
86	100
87	100
88	100
89	100
90	100
91	100
92	100
93	100
94	100
95	100
96	100
97	100
98	100
99	100
100	100

[illegible]

**NOTE ►**

\* Show all important zones of porosity, detail of all cores, and all drill-stem tests, including depth interval tested, cushion used, time tool open, flowing and shut-in pressures, and recoveries.

**INSTRUCTIONS** ▶ Attach drillers log or other acceptable log of well if available.

This Well Completion or Recompletion report and well log shall be filed with the Missouri State Geologist not later than 30 days after project completion.